



Non-Hospital Medical and Surgical Facilities Accreditation Program

# Bylaw Policy

## Appointment of Medical Staff to Facilities

### PURPOSE

The Non-Hospital Medical and Surgical Facilities Accreditation Program (NHMSFAP) Committee is responsible for establishing accreditation standards for non-hospital facilities and ensuring that facilities meet required standards for the quality and safety of service delivery in an accredited non-hospital facility.

The committee may establish standards, rules, policies and guidelines respecting the skills and training necessary for the appointment of medical staff.

This policy addresses the requirements necessary for the appointment of medical staff to a facility.

### POLICY

#### Medical staff application

Only a person that is a registrant, dentist, oral maxillofacial surgeon, or podiatric surgeon currently licensed to practise in good standing in British Columbia may be appointed to the medical staff of a facility.

An applicant may apply to the medical director for a medical staff appointment to a facility for a period of up to one year.

An applicant must state the procedures that he or she wishes to perform in the application to the medical director and must include his or her qualifications and satisfactory evidence of current experience in practice relevant to the procedure being requested.

Annual applications for reappointment must be made to the medical director, in a form approved by the registrar, and must clearly identify any changes in the applicant's hospital appointment or privileges and any material changes in clinical activities since the date of the last application.

### DEFINITIONS

#### appointment

The acceptance of a physician, dentist, oral maxillofacial surgeon, or podiatric surgeon to health-care facility staff based on his or her credentials and work history.

#### credentials

Professional education, clinical training, licensure, board and other certification, clinical experience, and other professional qualifications.

<b>credentialing</b>	The process of reviewing, verifying and evaluating a practitioner’s application for privileges, including review of credentials, letters of reference, curriculum vitae and regulatory history, in order to verify the presence of the specialized professional background required for a position within a health-care organization.
<b>privileging</b>	The process of determining a health-care professional’s current skill and competence to perform specific diagnostic or therapeutic procedures that the professional requests to perform and granting those procedures to be performed in a health-care facility.
<b>provincial privileging dictionary</b>	Part of the British Columbia’s Medical Quality Initiative (BCMQUI), this dictionary outlines the credentials required for activities performed by practitioners in a discipline. These activities are divided into core activities and non-core activities. Core activities are those activities that are performed by a majority of practitioners in a discipline by virtue of their training in that discipline. Non-core activities are those activities that require demonstration of additional credentials and/or a demonstration of skill to a member of the medical staff holding that privilege. For non-core activities, additional training or proof of skill is required.

## RESPONSIBILITY

Role	Responsibility
Medical director	<ul style="list-style-type: none"> <li>• Select, appoint and reappoint all medical staff</li> <li>• Review applications, credentials, and current experience in practice as defined in the BC MQI dictionaries before granting initial privileges and reappointment</li> <li>• Provide the College with a copy of all application information</li> <li>• Meet annually with each member of medical staff to review privileges granted and document such review in a form approved by the registrar to be kept on file at the facility unless otherwise indicated by the College</li> <li>• Advise the committee of resignation, revocation, suspension or restriction of hospital privileges of medical staff</li> <li>• Maintain records on all medical staff</li> </ul>
NHMSFAP Committee	<ul style="list-style-type: none"> <li>• Establish standards, rules, policies and guidelines respecting the qualifications necessary for the appointment of registrants, dentists, and podiatric surgeons to non-hospital medical/surgical facilities</li> </ul>

Role	Responsibility
NHMSFAP	<ul style="list-style-type: none"> <li>• Maintain records of current medical staff in facilities</li> <li>• Provide education support to the medical director in processes of selection, appointment and reappointment of medical staff</li> <li>• Ensure that the privileges granted are appropriate procedures for the facility</li> <li>• Review applications and notify the medical director of any limits or conditions on a physician licence affecting the privileges being granted within 60 days</li> </ul>
College of Physicians and Surgeons of BC	<ul style="list-style-type: none"> <li>• Verify the physician is current for practice for the privileges applied for</li> <li>• Provide confirmation to the medical director of a certificate of professional conduct and any restrictions noted</li> </ul>
College of Dental Surgeons of BC	<ul style="list-style-type: none"> <li>• Provide confirmation to the medical director of a letter of standing and any restrictions noted</li> </ul>
College of Podiatric Surgeons of BC	<ul style="list-style-type: none"> <li>• Provide confirmation to the medical director of a letter of good standing and any restrictions noted</li> </ul>